

PUBLIC EMPLOYMENT RELATIONS COMMISSION
 Street: 603 EVERGREEN PLAZA BUILDING - 711 CAPITOL WAY
 Mail: P.O. BOX 40919 OLYMPIA, WASHINGTON 98504-0919
 (360) 753-3444

DO NOT WRITE IN THIS SPACE

RECEIVED OLYMPIA SEP 17 2004 PUBLIC EMPLOYMENT RELATIONS COMMISSION

**PETITION FOR INVESTIGATION OF
 QUESTION CONCERNING REPRESENTATION**
[] Amended Petition in Case _____ -E- _____

Instructions: See other side of this form.

Applicable Rules: Chapters 10-08, 391-08 and 391-25 WAC.

The petitioner claims that a question concerning representation exists involving certain employees of the employer named below.

1. EMPLOYER Fish and Wildlife

CONTACT PERSON Eva Santos, Labor Relations, OFM
 ADDRESS P.O. Box 43113
 CITY/STATE Olympia, WA ZIP 98504
 TELEPHONE (360) 725-5150 EXT. _____ FAX (360) 902-0414

ATTORNEY or
 REPRESENTATIVE Cindy Lerch, Labor Relations
 ADDRESS 600 Capitol Way North
 CITY/STATE Olympia, WA ZIP 98501
 TELEPHONE (360) 902-2277 EXT. _____ FAX (360) 902-2392

2. PETITIONER Washington Public Employees Association

CONTACT PERSON Leslie Liddle, Executive Director
 ADDRESS 140 Percival ST. NW
 CITY/STATE Olympia, WA ZIP 98502
 TELEPHONE (360) 943-1121 EXT. _____ FAX (360) 357-7627

ATTORNEY or
 REPRESENTATIVE Herb Harris, Organizer
 ADDRESS P.O. Box 7159
 CITY/STATE Olympia, WA ZIP 98507
 TELEPHONE (360) 943-1121 EXT. _____ FAX (360) 357-7627

3. INCUMBENT BARGAINING REPRESENTATIVE Indicate:

☒ The employees involved are not currently represented for bargaining; or

☐ The employees involved are currently represented by:

ORGANIZATION _____

CONTACT PERSON _____
 ADDRESS _____
 CITY/STATE _____ ZIP _____
 TELEPHONE (_____) _____ EXT. _____ FAX (_____) _____

ATTORNEY or
 REPRESENTATIVE _____
 ADDRESS _____
 CITY/STATE _____ ZIP _____
 TELEPHONE (_____) _____ EXT. _____ FAX (_____) _____

4. COLLECTIVE BARGAINING AGREEMENT Indicate:

☒ There has never been an agreement covering the employees involved; or

☐ A copy of the current (or most recent) agreement is attached.

5. SHOWING OF INTEREST A petition filed by an organization or employees must be accompanied by a showing of interest showing that the petitioner has the support of 30% or more of the employees in the bargaining unit.

6. BARGAINING UNIT

a. **EMPLOYER'S PRINCIPAL BUSINESS**

_____ Government _____

b. **DEPARTMENT OR DIVISION INVOLVED**

_____ Fish Program _____

c. **DESCRIPTION OF BARGAINING UNIT** Indicate inclusions/exclusions, contract page or case/decision number:

Included: All employees of the Biological Data Systems and Quantitative Assessments of the Science Division, Fish Program at the Department of Fish and Wildlife.

Excluded: All Supervisors, confidential employees, WMS and those in other bargaining units.

d. **NUMBER OF EMPLOYEES IN BARGAINING UNIT** 9

7. DESIGNATION OF REQUEST Indicate:

☒ **RECOGNITION REQUEST.** The petitioner claims to represent a majority of the employees involved, and requests certification as exclusive bargaining representative of the bargaining unit.

☐ **CHANGE OF REPRESENTATIVE.** The employees in the bargaining unit desire to change their designation of exclusive bargaining representative, and to designate the petitioner as their exclusive bargaining representative.

☐ **DECERTIFICATION.** The employees in the bargaining unit no longer desire to be represented by any employee organization.

☐ **EMPLOYER PETITION - DEMAND FOR RECOGNITION.** The employer has been presented with one or more demands for recognition (per attached documentation), and requests a determination by the Commission.

☐ **EMPLOYER PETITION - INCUMBENCY QUESTIONED.** The employer has a good faith belief (per attached documentation) that a majority of employees no longer desire representation by the incumbent exclusive bargaining representative.

8. OTHER RELEVANT FACTS Indicate, if applicable:

☐ Additional information is set forth on separate sheets attached to this petition form.

9. AUTHORIZED SIGNATURE FOR PETITIONER

NAME (PRINT) Herb Harris

SIGNATURE [Signature]

TITLE Organizer DATE 9/17/04

Washington Public Employees Association, UFCW Local 365

OLYMPIA HEADQUARTERS

140 Percival Street NW
P.O. Box 7159, Olympia, WA 98507
(360) 943-1121 1-800-544-WPEA
Fax: (360) 357-7627 wpea@wpea.org

EASTERN REGIONAL OFFICE

N. 4407 Division Street, Suite 514
Spokane, WA 99207
(509) 483-0383 1-877-734-WPEA
Fax: (509) 483-0264 wpeaeast@wpea.org

NORTHWEST REGIONAL OFFICE

18820 Aurora Avenue N., Suite 204
Shoreline, WA 98133
(206) 542-2690 1-877-901-WPEA
Fax: (206) 542-1735 luis@wpea.org

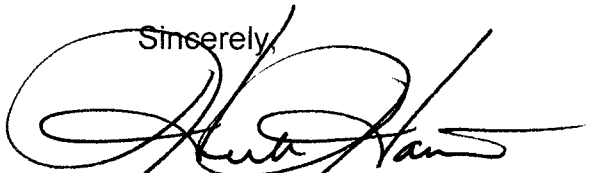
September 17, 2004

Cindy Lerch, Labor Relations Manager
600 Capitol Way North
Olympia, WA 98501

Dear Ms. Lerch:

This letter and enclosed petition is to inform you that we are filing a representation petition for a group of employees in the Biological Data and Quantitative Assessment sections of the Fish Program at Fish and Wildlife.

Sincerely,



Herb Harris
Organizer

WPEA

Washington Public Employees Association, UFCW Local 365

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September 17, 2004

Eva Santos, Director Labor Relations
Office of Financial Management
PO Box 43113
Olympia, WA 98504

Dear Ms. Santos:

This letter and enclosed petition is to inform you that we are filing a petition for representation with the Public Employment Relations Commission for a group of employees in the Biological Data Section and Quantitative Assessments of the Fish Program at the Department of Fish and Wildlife.

Sincerely,



Herb Harris
Organizer

Washington Public Employees Association, UFCW Local 365

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As per PERC Commission requirements and WAC 391-08-120(4), I, Herb Harris, WPEA Organizer, do certify that the following facts regarding servicing of the Petition for the Department of Fish and Wildlife employees is true.

On September 17, 2004, I deposited in the United States mail, properly stamped and addressed, a copy of the petition to Eva Santos, Director, Labor Relations, OFM; Cindy Lerch, DFW. To the best of my knowledge and belief these are the representatives of the other party that would need to be notified to fulfill our obligations under WAC 391-08-120(4).

Signed September 17, 2004

Herb Harris, WPEA Organizer


Signature